Best Available Copy

PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003									Application or Docket Number 10/06570 42714031020					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	EN		OR	OTHER SMALL		
TOTAL CLAIMS			JC!					RATE		FEE		PATE	FEE	
FOR			NUMBER FILED		NUMB	NUMBER EXTRA		BASIC FEE		375.00	OR	basic fee	750.00	
TOTAL CHARGEABLE CLAIMS			ع minus 20=		• (• 9		X\$ 9=			OR	X\$18=		
INDEPENDENT CLAIMS			.S mìr	nus 3 =	• (0		X42=			OR	X84=		
MULTIPLE DEPENDENT CLAIM PI			RESENT					+140=		OR				
* If the difference in column 1 is			less than zero, enter "0" in column 2					TOTAL			OR			
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMAL	.L.	ENTITY	OR	OTHER		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST IBER OUSLY	PRESENT EXTRA		RATE	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Z OF	Total /4	.14	Minus	-2	<u></u>	= 0		X\$ 9:	=		OR	X\$18= ·		
ME	Independent	• 3	Minus	***	₹	-0		X42=			OR	X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						I	+140			OR	+280=		
It mot 1-23-04								TOT ADDIT, F	AL			TOTAL		
(Column 1) (Column 2) (Column 3)									EŁI			ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVK PAID	BER OUSLY	PRESENT EXTRA		PATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Ş	Total	. 9	Minus	* 0	70	· 9		X\$ 9:	=		ØЯ	X\$18=	\/	
AME	Independent	<u>.</u> ე	Minus	***	3	= '4		X42=	,		OR	X84= i		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140:	=	1	OR	+280=		
								TOT ADDIT. F	AL EE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)														
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		PATE	ADDI- TIONAL FEE	
Š	Total	•	Minus	**		2		X\$ 9:			OR	X\$18=		
AME	Independent	•	Minus	***		2		X42=			OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140:	- -		OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **OFFICE OR ADDIT. FEE														